	Complete if Known		
	Application Number		
FEE TRANSMITTAL	Filing Date		
	First Named Inventor	Sowden, Harry S.	
	Group Art Unit		
	Examiner Name		
	Attorney Docket Number	MCP0296	

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILE	D NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	13 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	3 - 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
		TOTAL FEES	\$ 710.00	

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/MCP0296/SHH in the amount of \$710.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/MCP0296/SHH. Three copies of this sheet are enclosed.

SUBMITTED E	Complete (if applicable)		
Typed or Printed Name	Sharon A. Hegedus		Reg. No. 33058
Signature	HUMAG	Date: 09/28/2001	Deposit Account No. 10-0750

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Sowden, Harry S.

For : Systems, Methods and Apparatuses for Manufacturing

Dosage Forms

Express Mail Certificate

"Express Mail" mailing number: EJ476789045US

Date of Deposit:

September 28, 2001

I hereby certify that this complete application, including specification pages, claims, an unexecuted declaration and power of attorney, and informal drawings, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Karen Hall-Morgan

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)